

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

BREATH ALCOHOL PROGRAM

INTOX EC/IR II MAINTENANCE REPORT 🖰

RECEIVED

				40 M	40 004 <i>E</i> E	
Complete this report at the time of	the regular monthly	prevent By Ca	aroi Day at 1:1	iu pm, Novi	10, ZU15	
days). Complete this report whenever				nara.		
	into service. Retain the original and send a copy within 15 days to the			<u> </u>		
12683	TOX BC/IR II SN NAMB OF AGENCY		DATE OF INSPECTION			
			11/02/2015 TIME OF INSPECTION			
LOCATION OF INSTRUMENT (STREET AND CITY) 5120 CLAYTON RD ST LOUIS			10:15 CST	• •		
CHECKLIST: Place a mark in the box	d to be entired	1				
established limits. (Write in obser						
before using instrument.	ved values where dec	ermaneo, ommar	red Teems mast be	COLLECTED		
X DIAGNOSTIC RECORD						
X BLANK CHECK	X CO2 CHECK					
X FC 1 TEMP		X FLOW CHECK				
X SRC TEMP		-				
		X FCB CHECK				
X DET TEMP		X CRC COMP CHE				
X BT TEMP X CRC CAL		X CRC CAL CHEC	K			
X STD 2 TEMP		X PRINT TEST				
X ETH CHECK				ш,		
BREATH ANALYZER ACCURACY STANDA	RDS					
SIMULATOR SOLUTION		X COMPRESSED E	THANOL-GAS MIXTU	RR		
		OT# AG400603		DATE 01/06/2	2016	
SIMULATOR TEMP (34°C +0.2°C)					1010	
SIMOLATOR TEMP (34°C ±0.2°C)	SIMULAT	for s/n	SIMULATOR EXP	DATR		
X CALIBRATION CHECK - (ONLY ONE	STANDARD IS TO BE	USED PER MAIN	PENANCE REPORT)		<i></i>	
			•			
Run three tests using a stand	ard solution. All	. three tests m		% of the stand	dard value	
Run three tests using a stand and must have a spread of .00	ard solution. All 5 or less. Mark t	three tests much box correspond	ust be within ±5	% of the stand andard solution	dard value on being	
Run three tests using a stand and must have a spread of .00 used. (PRINTOUT ATTACHED)	ard solution. All 5 or less. Mark t	three tests much box correspond	ust be within ±5	% of the stand andard solution	dard value on being	
and must have a spread of .00 used. (PRINTOUT ATTACHED)	5 or less. Mark to BETWEEN 0.095% AND	the box correspondence of the box correspond	ust be within ±5 onding to the st	% of the stand andard solutio	dard value on being	
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Airgas USA LLC (LAB)

3500 Bernard Street St. Louis, Mo. 63103

Ph: (314) 533-3100 Fax: (314) 533-7328

Certificate of Analysis

Customer Name Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146 Test Date: 6-Jan-2014

Lot # AG400603

Exp. Date 6-Jan-2016 Cyl. Type

Component Ethanol

Nitrogen

Certified Concentration

 0.080 ± 0.002 BrAC (218 ppm)

Balance

Certification Traceable to N.I.S.T. RGM Ethanol Standards:

Serial No.	Concentration 391.8 ppm 259.8 ppm 209.0 ppm 103.7 ppm 52.22 ppm	<u>Serial No.</u>	Concentration
EB0010581		EB0010603	392.5 ppm
EB0010570		EB0010559	258.9 ppm
EB0010285		EB0010595	208.9 ppm
EB0010561		EB0010562	104.9 ppm
EB0010681		EB0010579	52.94 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2014.01.05 14:54:15 -06:00 Reason: Dry gas standerd certification of analysis Location: Afrgas USA LLC (Lab)

Analyst:

Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01